

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1 OF 1
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (in Full)		FEC IDENTIFICATION NUMBER ▼	
Empower Citizens Network		C 0 0 5 2 2 8 2 1	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		1 0 / 2 4 / 2 0 1 2	
Full Name (Last, First, Middle Initial) of Payee		Date	
Media Services		1 0 / 2 3 / 2 0 1 2	
Mailing Address		Amount	
7800 Whipple Ave NW		3 8 5 1 8 3 5	
City State Zip Code			
N. Canton OH 44720			
Purpose of Expenditure		Office Sought:	
Advertising		<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Category/Type		State: _____ District: _____	
0 0 4		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Barack Obama		<input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			
3 8 6 1 8 3 5			
Full Name (Last, First, Middle Initial) of Payee		Date	
Mailing Address		Amount	
City State Zip Code			
Purpose of Expenditure		Office Sought:	
		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Category/Type		State: _____ District: _____	
		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought			
(a) SUBTOTAL of Itemized Independent Expenditures.....		3 8 5 1 8 3 5	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures.....		3 8 5 1 8 3 5	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Robert W. Warther</u>		Date 1 2 / 0 3 / 2 0 1 2	

FEC Schedule E (Form 3X) Rev. 07/2011

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>

<input type="checkbox"/> USPS Express Mail	Postmarked
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<input type="checkbox"/> Postmark Illegible

<input type="checkbox"/> No Postmark

<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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PREPARER

N/A
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